Case 16-18339 Doc 16 Filed 07/26/16 Page 1 of 37

- #11	in this info	ormation to identify your	casa:			
			case.			
Der	otor 1	Annice Walker First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
		Bankruptcy Court for the:	DISTRICT OF MARYLA	ND		
(if kn	e number own)	16-18339			☐ Chec	k if this is an
					amer	nded filing
		<u>-</u>				
		orm 106Sum	111-11111	. I Contain Otation in all of a month of		
				ac Certain Statistical Information are filing together, both are equally responsible for	or cupplyi	12/15
info	rmation. Fi	Il out all of your schedul	es first; then complete th	e information on this form. If you are filing amend		
		. •	new Summary and check	the box at the top of this page.		
Par	Sum	marize Your Assets				
					Your a	assets of what you own
1.	Schedule	a A/B: Property (Official F	orm 106A/B)			,
	1a. Copy	line 55, Total real estate, t	rom Schedule A/B		\$	447,149.00
	1b. Copy	line 62, Total personal pro	perty, from Schedule A/B		\$	3,455.00
	1c. Copy	line 63, Total of all proper	y on Schedule A/B		\$	450,604.00
Par	2: Sum	marize Your Liabilities				
					Vour I	iabilities
						nt you owe
2.			claims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	314,152.94
3.			Unsecured Claims (Official		\$	0.00
	.,		"	s) from line 6e of Schedule E/F	· <u></u>	
	3b. Copy	the total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	1,945.00
				Your total liabilities	\$	316,097.94
				rour total habilities		310,037.34
Par	t 3: Sum	marize Your Income and	d Expenses			
4.	Schedule	I: Your Income (Official Fo	orm 106I)			
	Copy you	r combined monthly incom	ne from line 12 of Schedule	1	\$	4,819.27
5.		J: Your Expenses (Official r monthly expenses from I			\$	6,095.00
Par	t 4: Ans	wer These Questions for	Administrative and Stati	stical Records		
6.	-		er Chapters 7, 11, or 13? t on this part of the form. Ch	heck this box and submit this form to the court with yo	ur other sc	hedules.
7	Yes	d of dobt do you hous?				
7.		d of debt do you have?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or
	☐ You	r debts are not primarily	consumer debts. You have	ve nothing to report on this part of the form. Check this	s box and s	submit this form to

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets a

Debtor 1 Annice Walker Case number (if known) 16-18339

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____6,866.66

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill	in this inform	ation to identify yo	our case and thi	is filing	ı•						
	tor 1	Annice Walker		3 ming							
	ioi i	First Name	Middle I	Name		Last Name					
1	tor 2 use, if filing)	First Name	Middle I	Name		Last Name					
		kruptcy Court for th	e: DISTRICT C	OF MAR	RYI AND						
Oille	ca Glates Barr	Kruptey Court for th	c. <u>Biornior</u>	31 1717 (1	(12,110						
Cas	e number 1	6-18339				_					Check if this is an amended filing
											amenaca ming
Off	ficial For	m 106A/B									
		A/B: Pro	perty								12/15
		parately list and des		n asset	only once. If	an asset fits in mo	ore than one	category, I	ist the asset in	n the c	
		as complete and acc space is needed, atta									
Answ	er every questi	on.	•								, ,
Part	1: Describe E	ach Residence, Build	ding, Land, or Oth	er Real	Estate You O	wn or Have an Inte	erest In				
1. D c	you own or ha	ive any legal or equit	able interest in an	ny reside	ence, building	, land, or similar p	property?				
	No. Go to Part 2	2.									
	Yes. Where is										
	res. Where is	the property:									
1.1				What	is the propert	y? Check all that app	ly				
		vood Avenue	tion		Single-family	home					or exemptions. Put
	Street address, ir	available, or other descrip	otion		•	lti-unit building					ns on Schedule D: cured by Property.
					Condominiun	n or cooperative					
					Manufacture	d or mobile home		Current v	alue of the	Cui	rrent value of the
	Takoma Pa		20912-0000		Land			entire pro		por	rtion you own?
	City	State	ZIP Code		Investment p Timeshare	roperty			147,149.00	-	\$447,149.00
					Other						wnership interest by the entireties, or
				Who I		t in the property?	Check one	a life esta Fee sin	ate), if known.		
	Montgome	rv		_	Debtor 1 only Debtor 2 only			1 66 3111	ibie		
	County	.,			-	Debtor 2 only		Ohaa			
						of the debtors and a	another		ck if this is con nstructions)	nmuni	ty property
					information y	ou wish to add ak	oout this item	, such as I	local		
				prope	erty identificat	ion number.					
		r value of the porti ve attached for Pa									\$447,149.00
Part		our Vehicles									
ıaıı	Z Describe 1	our vernicles									
		e, or have legal or es. If you lease a ve								ehicle	es you own that
3. C	ars, vans, trud	cks, tractors, spor	t utility vehicles	s, moto	rcycles						
_	Na										
	No										

Schedule A/B: Property

Official Form 106A/B

page 1

De	Annice v	valker Case number (i	1 Known) 16-18	3339
		motor homes, ATVs and other recreational vehicles, other vehicles, and accessories lers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	es	
	No			
	☐Yes			
		e of the portion you own for all of your entries from Part 2, including any entries for ached for Part 2. Write that number here		\$0.00
Par	rt 3: Describe Your P	ersonal and Household Items		
		ny legal or equitable interest in any of the following items?		urrent value of the
			D	ortion you own? o not deduct secured aims or exemptions.
	Household goods a Examples: Major ap ☐ No	nd furnishings pliances, furniture, linens, china, kitchenware		
-	Yes. Describe			
		Used furniture, kitchen appliances and utensils, vacuum cleaner,		
		computer, copier, china, TV, DVD player, luggage, mp3 player, books, misc. household tools, cell phone		\$3,000.00
	including	ns and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; cell phones, cameras, media players, games	music collection	ns; electronic devices
	■ No □ Yes. Describe			
		e and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stan lections, memorabilia, collectibles	np, coin, or bas	eball card collections;
	■ No □ Yes. Describe			
		ts and hobbies hotographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; nstruments	canoes and kay	raks; carpentry tools;
	□ No■ Yes. Describe			
	Tes. Describe	•		
		Camera	-	\$50.00
١	Firearms Examples: Pistols, ■ No □ Yes. Describe	rifles, shotguns, ammunition, and related equipment		
_	Clothes Examples: Everyda ■ No	ay clothes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe			
	Jewelry <i>Examples:</i> Everyda ☐ No	ay jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, sil	ver
١	Yes. Describe			
		Misc. cosutme jewlery		\$50.00

Official Form 106A/B Schedule A/B: Property

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De	ebtor 1	Annice Walke	er		Case number (if known)	16-18339
13.		rm animals oles: Dogs, cats, b	irds, horses			
	■ No □ Yes.	Describe				
	Any ot	her personal and	household items you did	not already list, including a	any health aids you did not list	
	_	Give specific info	rmation			
15				Part 3, including any entries	for pages you have attached	\$3,100.00
Pa	rt 4: De	scribe Your Financi	ial Assets			
Do	you ow	vn or have any le	gal or equitable interest ir	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No Î			•	nd on hand when you file your petition	no
	■ Yes					
					Cash	\$55.00
	□ No			ounts; certificates of deposit; s with the same institution, list Institution name:	shares in credit unions, brokerage h t each.	nouses, and other similar
			17.1. Checking	Wells Fargo		\$300.00
18.			r publicly traded stocks nvestment accounts with br	okerage firms, money market	accounts	
			Institution or issuer	name:		
	•	ublicly traded sto enture	ck and interests in incorp	orated and unincorporated	businesses, including an interes	t in an LLC, partnership, and
		Give specific info	rmation about them Name of entity:		% of ownership:	
20.	Negoti	iable instruments i	nclude personal checks, ca	otiable and non-negotiable is shiers' checks, promissory no ansfer to someone by signing	ites, and money orders.	
	☐ Yes.	Give specific infor	mation about them Issuer name:			
		ment or pension a ples: Interests in IF		403(b), thrift savings accounts	s, or other pension or profit-sharing	plans
		List each account	separately. Type of account:	Institution name:		
22.	Your s Examp		deposits you have made so	o that you may continue servion public utilities (electric, gas, v	ce or use from a company water), telecommunications compar	nies, or others
	■ No					

Official Form 106A/B Schedule A/B: Property page 3

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De	btor 1	Annice Wa	alker	Case number (if known)	16-18339			
	☐ Yes		Institution name or individual:					
	_	es (A contrac	et for a periodic payment of money to you, either for life or for a number o	f years)				
	■ No □ Yes		Issuer name and description.					
	26 U.S.C		ation IRA, in an account in a qualified ABLE program, or under a qualified ABLE program and a qualified ABLE progr	alified state tuition pro	gram.			
	■ No □ Yes		Institution name and description. Separately file the records of any inter	rests.11 U.S.C. § 521(c):				
	_ ′	equitable or	future interests in property (other than anything listed in line 1), an	d rights or powers exe	rcisable for your benefit			
	■ No □ Yes.	Give specific	information about them					
26.			, trademarks, trade secrets, and other intellectual property lomain names, websites, proceeds from royalties and licensing agreeme	nts				
	■ No □ Yes.	Give specific	information about them					
			s, and other general intangibles permits, exclusive licenses, cooperative association holdings, liquor licenses	nses, professional license	es			
		Give specific	information about them					
Мс	oney or p	property owe	d to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.			
	_	unds owed to	o you					
	■ No □ Yes. (Give specific i	information about them, including whether you already filed the returns a	nd the tax years				
	■ No	les: Past due	or lump sum alimony, spousal support, child support, maintenance, divo	rce settlement, property	settlement			
	80. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else							
	Yes.	Give specific	information					
			Potential Workers' Compensation Award		Unknown			
	Ехатр	t s in insuran d les: Health, di	ce policies isability, or life insurance; health savings account (HSA); credit, homeow	mer's, or renter's insuran	ce			
	■ No □ Yes. I	Name the insu	urance company of each policy and list its value. Company name: Beneficia	ary:	Surrender or refund value:			
	If you a someon		perty that is due you from someone who has died ciary of a living trust, expect proceeds from a life insurance policy, or are information	currently entitled to rece	vive property because			

Official Form 106A/B Schedule A/B: Property page 4

Deb	otor 1	Annice Walker		Case number (if known)	16-18339
_	Exam	s against third parties, whether or not you have filed a law ples: Accidents, employment disputes, insurance claims, or rig		and for payment	
	■ No □ Yes.	Describe each claim			
3/1	Other (contingent and unliquidated claims of every nature, includ	ting counterclaims	of the debtor and rights to	set off claims
_	■ No	contingent and uninquidated claims of every nature, include	anig counterclaims	or the debtor and rights to	Set on Claims
		Describe each claim			
35.	Any fir	nancial assets you did not already list			
	No				
	☐ Yes.	Give specific information			
36.		the dollar value of all of your entries from Part 4, including art 4. Write that number here		, ,	\$355.00
Part	5: De	escribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. [Do you	own or have any legal or equitable interest in any business-relate	d property?		
	No. Go	o to Part 6.			
	Yes. C	Go to line 38.			
Part		escribe Any Farm- and Commercial Fishing-Related Property You over or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do yοι	u own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
		Go to Part 7.			
	☐ Yes	s. Go to line 47.			
Dow	7.	Describe All Bernerts Very Come on Heavy on Interest in That Very	Did Net List Above		
Part	: //:	Describe All Property You Own or Have an Interest in That You	DIG NOT LIST Above		
53.		u have other property of any kind you did not already list? ples: Season tickets, country club membership			
	No				
	☐ Yes.	Give specific information			
54.	Add t	the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
		,			Ψ0100
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	1: Total real estate, line 2			\$447,149.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		<u> </u>
57.	Part 3	3: Total personal and household items, line 15	\$3,100.00		
58.		4: Total financial assets, line 36	\$355.00		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$3,455.00	Copy personal property to	otal \$3,455.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$450,604.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this info				
Debtor 1	Annice Walker			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	Sankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number	16-18339			
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Used furniture, kitchen appliances and utensils, vacuum cleaner,	\$3,000.00		\$1,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)	
computer, copier, china, TV, DVD player, luggage, mp3 player, books, misc. household tools, cell phone Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
Used furniture, kitchen appliances and utensils, vacuum cleaner,	\$3,000.00		\$2,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
computer, copier, china, TV, DVD player, luggage, mp3 player, books, misc. household tools, cell phone Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	11-304(I)(I)(I)(I)	
Camera Line from Schedule A/B: 9.1	\$50.00		\$50.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
Line Holli Schedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11-30-(1)(1)(1)(1)	
Misc. cosutme jewlery Line from Schedule A/B: 12.1	\$50.00		\$50.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
Line from Goriodale PVD. 12.1			100% of fair market value, up to any applicable statutory limit	1100.311 004(1)(1)(1)(1)	

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De	ebtor 1 Annice Walker		Case number (if known)	16-18339		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Cash Line from Schedule A/B: 16.1	\$55.00		\$55.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line non schedule Arb. 10.1		100% of fair market value, up to any applicable statutory limit		1100.3 11 004()(1)(1)(1)	
	Checking: Wells Fargo Line from Schedule A/B: 17.1	\$300.00		\$300.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)	
	Line Ironi Scriedule Arb. 11.1			100% of fair market value, up to any applicable statutory limit	. 100. 3 11 004(1/(1/(1/(1/	
	Potential Workers' Compensation Award	Unknown			Md. Code Ann., Lab. & Empl.	
	Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	§ 9-732	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No	3 years after that for ca	ises fi			
	☐ Yes					

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Fill in this information to identify					
Fill in this information to identify you	ır case:				
Debtor 1 Annice Walker First Name	Middle Name Las	st Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name Las	st Name			
United States Bankruptcy Court for the	DISTRICT OF MARYLAND				
Case number 16-18339					
(if known)				_	if this is an
				ameno	led filing
Official Form 106D					
	Who Have Claims Se	cured	by Propert	v	12/15
Be as complete and accurate as possible.	If two married people are filing together, be out, number the entries, and attach it to thi	oth are equa	lly responsible for su	pplying correct informa	tion. If more space
1. Do any creditors have claims secured by	y your property?				
☐ No. Check this box and submit t	his form to the court with your other sche	edules. You	have nothing else to	o report on this form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
	more than one secured claim, list the creditor		Column A	Column B	Column C
much as possible, list the claims in alphabeti	s a particular claim, list the other creditors in P cal order according to the creditor's name.	an 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Comptroller of Maryland	Describe the property that secures the cl	laim:	\$16,528.94	\$447,149.00	\$0.00
Creditor's Name	704 Maplewood Avenue Takoma	a			
Compliance Division	Park, MD 20912 Montgomery County				
301 West Preston Street, Room 409	As of the date you file, the claim is: Check	c all that			
Baltimore, MD 21201	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	■ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as mortg	gage or secur	ed		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	ı Lion - Da	scarded Bast-Bat	tition and Therefore	a Void
☐ Check if this claim relates to a community debt	Other (including a right to offset)	C LIGHT - IXC	corded Fost-Fet	illion and Therefore	- Void
Date debt was incurred	Last 4 digits of account number				
Wells Fargo Home					
Mortgage	Describe the property that secures the cl	laim:	\$297,624.00	\$447,149.00	\$0.00
Creditor's Name	704 Maplewood Avenue Takoma Park, MD 20912 Montgomery	a			
	County				
PO Box 10328	As of the date you file, the claim is: Check apply.	call that			
Des Moines, IA 50306	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortg	age or secur	ed		
Debtor 2 only	car loan)	,9			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	•			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	rtgage			
Date debt was incurred	Last 4 digits of account number				

Schedule D: Creditors Who Have Claims Secured by Property

Official Form 106D

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Deptor	Annice Walker			Case number (if know)	16-18339	
	First Name	Middle Name	Last Name			
Add th	e dollar value of ye	our entries in Column A on t	his page. Write that number h	nere: \$314,152	.94	
	s the last page of hat number here:	your form, add the dollar va	lue totals from all pages.	\$314,152	.94	
Part 2:	List Others to	Be Notified for a Debt Th	at You Already Listed			
trying to than one	collect from you f creditor for any o	or a debt you owe to someo	ne else, list the creditor in Pa	rt 1, and then list the collection age	or example, if a collection agency is ncy here. Similarly, if you have more tional persons to be notified for any	
	ame, Number, Stree	et, City, State & Zip Code /n, LLP		On which line in Part 1 did you ente	er the creditor? 2.2	
	0021 Balls For	d Road, Suite #200		Last 4 digits of account number	-	

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	Case 10	-10009 DOC 10	1 1160 01720/	10 Tage 12 C	1 37	
Fill in this information to	identify your cas	se:				
Debtor 1 Ann	ice Walker					
First N		Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First N	ame	Middle Name	Last Name			
United States Bankruptcy	Court for the:	DISTRICT OF MARYLANI	D			
Case number 16-1833	9					
(if known)					☐ Check	if this is an
					amend	ed filing
Official Form 106	=/F					
Schedule E/F: C		o Have Unsecur	ed Claims			12/15
Schedule G: Executory Con- Schedule D: Creditors Who eft. Attach the Continuation name and case number (if k	Have Claims Secure Page to this page.	d by Property. If more space	e is needed, copy the F	Part you need, fill it out,	number the entries in	the boxes on the
Part 1: List All of You	r PRIORITY Unse	cured Claims				
1. Do any creditors have p	priority unsecured c	laims against you?				
☐ No. Go to Part 2.						
Yes.						
possible, list the claims in	n it is. If a claim has b n alphabetical order a	a creditor has more than one oth priority and nonpriority an ocording to the creditor's namular claim, list the other credi	nounts, list that claim her ne. If you have more thar	re and show both priority a	and nonpriority amount	s. As much as
(For an explanation of ea	ch type of claim, see	the instructions for this form i	in the instruction booklet.		Dul a site :	Name of a site.
				Total claim	Priority amount	Nonpriority amount
2.1 Comptroller of	Maryland	Last 4 digits of ac	ccount number	Unknown	Unknown	Unknown
Priority Creditor's N		When was the de	ht inquired?			
Compliance Di 301 West Pres	vision ton Street, Rooi				_	
409	,					
Baltimore, MD Number Street City		As of the date wa	u file the eleim ie. Che	alcall that annly		
Who incurred the deb		Contingent	u file, the claim is: Ched	ск ан тат арргу		
■ Debtor 1 only	one one.	<u> </u>				
•		☐ Unliquidated				
Debtor 2 only		☐ Disputed	Y unsecured claim:			
☐ Debtor 1 and Debto	•	Domestic supp				
At least one of the o			-			
☐ Check if this claim	-		ain other debts you owe	-		
Is the claim subject to	onset?		th or personal injury while	e you were intoxicated		
☐ Yes		Other. Specify	Income Tax			

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Deb	tor 1 Annice Walker	Ca	ase number (if know)	16-18339	
2.2	Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Centralized Insolvency Operations PO Box 7346 Philodolphia DA 40444 7346	When was the debt incurred?		-	
	Philadelphia, PA 19114-7346 Number Street City State Zlp Code	As of the date you file, the claim is: Che	eck all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe	e the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury whi	-		
	■ No	☐ Other. Specify			
	Yes	Income Tax			
4. L	■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what type	e of claim it is. Do not list cl	aims already included in	Part 1. If more
	٦			Total	claim
4.1	Capital One Bank (USA) NA	Last 4 digits of account number)584		\$684.00
	Nonpriority Creditor's Name PO Box 71083 Charlotte, NC 28272-1083 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim is.	спеск ан шасарру		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cl	aim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separati report as priority claims	ion agreement or divorce th	nat you did not	
	■ No	Debts to pension or profit-sharing p	lans, and other similar deb	ts	
	☐ Yes	Other Specify Credit Card			

Debtor	Annice Walker	Case number (if know) 16-18339	
4.2	Doctors Community Hospital	Last 4 digits of account number	\$120.00
	Nonpriority Creditor's Name 8118 Good Luck Rd	When was the debt incurred?	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bill	
4.3	FMS Financial Solutions	Last 4 digits of account number 19XX	\$77.00
	Nonpriority Creditor's Name 9001 Edmonston Road Suite 20	When was the debt incurred?	
	Greenbelt, MD 20770		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.4	Labcorp	Last 4 digits of account number	\$365.00
	Nonpriority Creditor's Name PO Box 2240	When was the debt incurred?	
	Burlington, NC 27216		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
		epo,	

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Debto	r 1 Annice Walker	Case number (if know) 16-18339	
4.5	Liberty Mutual Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	P.O. Box 55126 Boston, MA 02205	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured Debt	
	Maryland Division of		
4.6	Unemployment Insura Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	500 N Calvert Street #401 Baltimore, MD 21202	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ NO Yes	Other. Specify Unemployment overpayment	
		— ethiol. opening	
4.7	Medstar Southern Maryland Hosp. Ctr.	Last 4 digits of account number	\$215.00
	Nonpriority Creditor's Name		
	7503 Surratts Rd	When was the debt incurred?	
	Clinton, MD 20735 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bill	

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Debtor	1 Annice Walker	Case number (if know) 16-18339	
4.8	Medstar Southern Maryland Hosp. Ctr.	Last 4 digits of account number	\$65.00
	Nonpriority Creditor's Name 7503 Surratts Rd Clinton, MD 20735	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
4.9	PEPCO	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 13608 Philadelphia, PA 19101	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	_	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Utility Bill	
4.1	Receivables Management Solutions	Last 4 digits of account number 1924	\$197.00
	Nonpriority Creditor's Name 260 E. Wentworth Ave.	When was the debt incurred?	
	Saint Paul, MN 55118 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Collections	

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Debtor	1 Annice Walker	Case number (if know) 16-18339	
4.1	Trident Asset Management	Last 4 digits of account number 0928	\$222.00
1 .	Nonpriority Creditor's Name P.O. Box 888424	When was the debt incurred?	ΨΖΖΣ.00
	Atlanta, GA 30356		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only		
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes		
	☐ Yes	Other. Specify Collections	
4.1			
2	Washington Adventist Hospital Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	7600 Carroll Ave	When was the debt incurred?	
	Takoma Park, MD 20912 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	_		
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
4.1	Washington Gas	Last 4 digits of account number	Unknown
<u> </u>	Nonpriority Creditor's Name		
	PO Box 37747	When was the debt incurred?	
	Philadelphia, PA 19101 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The Critical and Journal, and Statistics of Statistics and Alexander	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utility Bill	

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Deptor	Annice walke	<u>er </u>		Case	iumber (if know)	16-18339	
4.1		burban Sanitary					Unknown
4	Commission Nonpriority Creditor's	Name	Last 4 digits of account number	er 			Unknown
	14501 Sweitzer Laurel, MD 2070	Lane	When was the debt incurred?				
-	Number Street City S Who incurred the de	tate ZIp Code	As of the date you file, the clai	m is: Checl	k all that apply		
	■ Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Deb	itor 2 only	☐ Disputed				
		e debtors and another	Type of NONPRIORITY unsecu	red claim:			
	_	im is for a community	☐ Student loans				
	debt Is the claim subject	•	☐ Obligations arising out of a sereport as priority claims	eparation ag	greement or divo	rce that you did not	
	■ No		Debts to pension or profit-sha	aring plans	and other similar	r debts	
	☐ Yes		■ Other. Specify Utility Bil		and outer outline	. 400.0	
			— Outer: Opeony				
Part 3:	List Others to I	Be Notified About a Del	ot That You Already Listed				
is tryir have n	ng to collect from yo nore than one credit	u for a debt you owe to so	bout your bankruptcy, for a debt that meone else, list the original creditor t you listed in Parts 1 or 2, list the ac r submit this page.	r in Parts 1	or 2, then list th	he collection agency here.	Similarly, if you
	nd Address		On which entry in Part 1 or Part 2 did y		•		
	nts Clearing Ho x 2373	use	Line 4.2 of (Check one):			riority Unsecured Claims	
	Burnie, MD 2106	0	■ Part 2: Creditors with Nonpriority Unsecured Claims				
	·		Last 4 digits of account number				
	nd Address		On which entry in Part 1 or Part 2 did y	ou list the c	original creditor?		
	can Medical Col		Line 4.4 of (Check one):				
	6. Saw Mill River ord, NY 10523	Road	Part 2: Creditors with Nonpriority Unsecured Claims				
Lillion	514, 141 10020		Last 4 digits of account number				
Name ar	nd Address		On which entry in Part 1 or Part 2 did y	ou list the c	original creditor?		
	ables Outsourc		Line 4.7 of (Check one):	☐ Part 1:	Creditors with Pr	riority Unsecured Claims	
	Greenspring Driv	re		Part 2:	Creditors with No	onpriority Unsecured Claims	
Suite 2	200 ium, MD 21093						
11111011	Idili, WID 21033		Last 4 digits of account number				
Name ar	nd Address		On which entry in Part 1 or Part 2 did y	ou list the c	original creditor?		
	ables Outsourc		Line 4.8 of (Check one):	☐ Part 1:	Creditors with Pr	riority Unsecured Claims	
	Greenspring Driv	/e		Part 2:	Creditors with No	onpriority Unsecured Claims	
Suite 2	ium, MD 21093						
	,		Last 4 digits of account number				
Part 4:	Add the Amou	nts for Each Type of Ur	secured Claim				
	_		ms. This information is for statistica	al reporting	purposes only	. 28 U.S.C. §159. Add the a	mounts for each
	f unsecured claim.	2,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	
						otal Claim	
	otal	nestic support obligations	S	6a.	\$	0.00	
from Pa	nims art1 6b. Tax	es and certain other debts	s you owe the government	6b.	\$	0.00	
			injury while you were intoxicated	6c.	\$	0.00	
	6d. Oth	er. Add all other priority uns	ecured claims. Write that amount here	. 6d.	\$	0.00	
	6e. Tot	al Priority. Add lines 6a thro	ough 6d.	6e.	\$	0.00	
					То	otal Claim	

Official Form 106 E/F

6f.

\$_

6f. Student loans

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Debtor 1 An	nice W	alker	Case n	number (if know)	16-18339
Total					0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,945.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1,945.00

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Annice Walker			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF MARYLAND		
Case number	16-18339			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code State what the contract or lease is for

2.1 Verizon Wireless

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					•
Fill in this	information to identify your	case:			
Debtor 1	Annice Walker				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	DISTRICT OF MARYLA	AND		
Case numb	per 16-18339				
(if known)	10-10339				☐ Check if this is an
					amended filing
Official	Form 106U				
	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
fill it out, ar your name	nd number the entries in the and case number (if known)	boxes on the left. Attack . Answer every question	h the Additional Page t n.	o this page. On the to	needed, copy the Additional Page, pp of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include)
	Go to line 3. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form 1	2 again as a codebtor only i	if that person is a guarar	ntor or cosigner. Make	sure you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1				☐ Schedule D. lii	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, li	
1	Number Street			_	
(City	State	ZIP Code		
3.2				☐ Schedule D, lii	ne .
	Name			Schedule E/F,	
				☐ Schedule G, li	
1	Number Street			_	
(City	State	ZIP Code		

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	in this information to identify your o										
Det	otor 1 Annice Wal	ker									
	otor 2										
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF MARY	LAND								
Cas	se number 16-18339						Che	ck if this is	:		
(If kr	nown)		_					An amend	•		
										ng postpetition ollowing date:	
O	fficial Form 106l							MM / DD/ `		J	
S	chedule I: Your Inc	ome						IVIIVI / DD/			12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ur spouse is not filing wi On the top of any additi	ith you, do	not include	infor	mati	on abou	ut your sp	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor	1				Debtor	2 or non-f	iling spouse	
	If you have more than one job,	Employment status	■ Empl	■ Employed			☐ Emp	oyed			
	attach a separate page with information about additional	Employment status	☐ Not e	☐ Not employed				□ Not €	employed		
	employers.	Occupation	Respritory Therapist								
	Include part-time, seasonal, or self-employed work.	Employer's name	Univers Center	sity of Mary	/land	Me	dical				
	Occupation may include student or homemaker, if it applies.	Employer's address	-	nden Avenu ore, MD 212							
		How long employed t	here?	Since De	cemb	er o	of				
Par	t 2: Give Details About Mo	nthly Income									
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have n	othing to rep	ort for	any	line, wri	te \$0 in the	space. In	clude your noi	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the	information f	or all	empl	oyers fo	r that pers	on on the li	ines below. If	you need
							For De	ebtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$		6,866.66	\$	N/A	
3.	Estimate and list monthly over	time pay.			3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.			4.	\$	6,8	366.66	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Annice Walker	_	C	Case number (if known)	16-	18339		
			-						
					For Debtor 1		r Debtor		
	C	w line 4 have	4		* • • • • • • • • • • • • • • • • • • •		n-filing s	-	
	Cop	y line 4 here	4.		\$ 6,866.66	\$_		N/A	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$ 2,047.39	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$ 0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c	: .	\$ 0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$ 0.00	\$		N/A	-
	5e.	Insurance	5e) .	\$ 0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$ 0.00	\$		N/A	
	5g.	Union dues	5g	J.	\$ 0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$0.00	+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$2,047.39	\$_		N/A	<u>-</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 4,819.27	\$_		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a		\$0.00	\$_		N/A	_
	8b.	Interest and dividends	8b).	\$	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$ 0.00	\$		N/A	
	8d.	Unemployment compensation	8d		\$ 0.00	\$-		N/A	_
	8e.	Social Security	8e		\$ 0.00	\$-		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance				*-			<u>. </u>
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$ 0.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g		\$ <u>0.00</u> \$ 0.00	\$-		N/A	_
	8h.	Other monthly income. Specify:	8h		\$ 0.00	· -		N/A	_
	011.		_ '''	···	Ψ	΄			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,819.27 + \$		N/A	= \$	4,819.27
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	4,019.27		IN/A	= \$ _	4,019.21
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		.,	•	Schedule	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					e. 12.	\$	4,819.27
								Combi	ned ly income
13.		you expect an increase or decrease within the year after you file this form	?						
		No. Yes Explain:							
		TAS EXDISID: 1							I

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Annice Walk	er			Chec	k if this is:	
Dob	otor 2					_	An amended filing	
	ouse, if filing)							ving postpetition chapter the following date:
Unit	ted States Bankr	uptcy Court for the	: DISTRI	CT OF MARYLAND		=	MM / DD / YYYY	
	se number 16 nown)	5-18339						
0	fficial Fo	rm 106J				•		
S	chedule	J: Your	Exper	ises				12/1
Be	as complete a	and accurate as	possible.	If two married people ar ch another sheet to this				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoid:				
		-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2.		e dependents?	□ No		·			
	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Granddaughte	er	5	Yes
					Over de en		7	□ No
					Grandson		7	■ Yes □ No
					Daughter - Dis	sabled	31	■ Yes
								□ No
								☐ Yes
3.	expenses of yourself and	penses include f people other t d your depende	nts? □	No Yes				
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. \$		1,995.00
	If not includ	led in line 4:						
						40 ft		0.00
		estate taxes rty, homeowner's	s, or renter	's insurance		4a. \$ 4b. \$		0.00
		•	-	ıpkeep expenses		4c. \$		100.00
_		owner's associat				4d. \$		0.00
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

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Debtor 1	Annice V	Valker	Case num	ber (if known)	16-18339
6. Utilitie	ae.				
		heat, natural gas	6a.	\$	1,200.00
		ver, garbage collection	6b.	· -	60.00
		, cell phone, Internet, satellite, and cable services	6c.	·	600.00
	Other. Spe		6d.	·	
	•	ekeeping supplies	ou. 7.	·	0.00
				·	900.00
		hildren's education costs	8.	·	0.00
	-	ry, and dry cleaning		\$	125.00
	•	roducts and services	10.	·	125.00
		ntal expenses	11.	\$	150.00
		Include gas, maintenance, bus or train fare.	12.	\$	200.00
		ar payments. clubs, recreation, newspapers, magazines, and books	13.	·	75.00
				·	
		ributions and religious donations	14.	Φ	0.00
5. Insura		surance deducted from your pay or included in lines 4 or 20.			
	Life insura		15a.	\$	0.00
	Health insu		15a. 15b.	·	0.00
	Vehicle ins			*	
			15c.	·	0.00
		rance. Specify:	15d.	Φ	0.00
		clude taxes deducted from your pay or included in lines 4 or 20.	40	œ.	0.00
Specify	•		16.	>	0.00
		ease payments:	170	¢	265.00
		ents for Vehicle 1	17a.	·	265.00
		ents for Vehicle 2	17b.	·	0.00
	Other. Spe		17c.	·	0.00
	Other. Spe	·	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report		¢	0.00
		our pay on line 5, Schedule I, Your Income (Official Form 106) you make to support others who do not live with you.	1).	\$	
		you make to support others who do not live with you.	19.	Ψ	0.00
Specify	·	erty expenses not included in lines 4 or 5 of this form or on Sc		our Incomo	
		on other property	20a.		0.00
	Real estate		20a. 20b.	·	0.00
				·	
		nomeowner's, or renter's insurance	20c.	·	0.00
		ce, repair, and upkeep expenses	20d.	·	0.00
		er's association or condominium dues	20e.	·	0.00
1. Other:	: Specify:	Assistance for disabled daughter	21.	+\$	300.00
2. Calcul	late vour r	nonthly expenses			
	•	through 21.		\$	6,095.00
		through 21. 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-:	2	\$	0,033.00
			<u>_</u>	i	
22c. A	ad line 22a	a and 22b. The result is your monthly expenses.		\$	6,095.00
3. Calcul	late your r	monthly net income.			
	•	12 (your combined monthly income) from Schedule I.	23a.	\$	4,819.27
		monthly expenses from line 22c above.	23b.	*	6,095.00
	, ,	, , , , , , , , , , , , , , , , , , , ,	_00.		<u> </u>
23c.	Subtract vo	our monthly expenses from your monthly income.		1.	
		is your monthly net income.	23c.	\$	-1,275.73
		•			
		in increase or decrease in your expenses within the year after			
		u expect to finish paying for your car loan within the year or do you expect y	our mortgage	payment to incre	ease or decrease because of a
		terms of your mortgage?			
■ No.					
☐ Yes	s.	Explain here:			

F:11 !:- 41.1	a la farma a l'ara da l'Ara d'farmana				
FIII IN thi	s information to identify your	case:			
Debtor 1	Annice Walker	ACT III AT			
Dahtaro	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	DISTRICT OF MARYLAN	D		
Officed Sc	ates bankruptcy Court for the.	DIGITALOT OF MARTILAR	<u> </u>		
Case nun	nber 16-18339				
(if known)				_	Check if this is an
					amended filing
	Form 106Dec				
Decla	aration About a	ın Individual I	Debtor's Sc	hedules	12/15
	both. 18 U.S.C. §§ 152, 1341, 1				
Did	you pay or agree to pay some	one who is NOT an attorne	ey to help you fill out b	ankruptcy forms?	
	No				
_	Yes. Name of person			Attach Bankruptcy Pet	ition Preparer's Notice.
_	·			Declaration, and Signa	nture (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the summ	ary and schedules filed	d with this declaration and	
х /	s/ Annice Walker		X		
_	Annice Walker		Signature of	Debtor 2	
\$	Signature of Debtor 1				
[Date July 26, 2016		Date		

		mation to identify you	r case:					
De	btor 1	Annice Walker First Name	Middle Name	Last Name				
Del	btor 2							
(Spo	ouse if, filing)	First Name	Middle Name	Last Name				
Uni	ited States Ba	inkruptcy Court for the:	DISTRICT OF MARYLAN	ID				
	_	16-18339				de a ale Maleira da la co		
(II KI	nown)					heck if this is an mended filing		
,						•		
Of	ficial Fo	rm 107						
			Affairs for Individ	duals Filing for B	ankruptcy	4/16		
					equally responsible for sup			
info	rmation. If m	nore space is needed,	attach a separate sheet to		additional pages, write you			
nun	nber (if know	n). Answer every ques	stion.					
Pa	rt 1: Give I	Details About Your Ma	rital Status and Where You	Lived Before				
1.	What is you	r current marital statu	ıs?					
	☐ Married	I						
	■ Not ma	rried						
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?				
	_	,	,					
	■ No	et all of the places you l	ived in the last 3 years. Do no	ot include where you live now	,			
		. ,	·	,				
	Debtor 1 Pi	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
3.	Within the I	ast 8 years did you ey	ver live with a snouse or led	ial equivalent in a commun	ity property state or territory	12 (Community property		
					co, Texas, Washington and W			
	■ No							
	_	ake sure you fill out <i>Sch</i>	hedule H: Your Codebtors (Of	fficial Form 106H).				
		, ,	(,				
Pai	rt 2 Expla	in the Sources of You	r Income					
4.					ear or the two previous caler	ndar years?		
			u received from all jobs and a have income that you receive					
	□ No		·					
	□ No ■ Yes Fil	I in the details.						
	- 103.11	in the details.						
			Debtor 1	Cross inner	Debtor 2	Cupan in same		
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions		
			,	exclusions)	,	and exclusions)		
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$34,333.31	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

Official Form 107

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Debto	Debtor 1 Annice Walker				Case number (if known) 16-18339						
				Debtor 1		Debtor 2					
	_		Sources of income Check all that apply. Gross income (before deductions and exclusions)		Sources of ince Check all that ap		Gross income (before deductions and exclusions)				
		■ Wages, commissions, bonuses, tips	\$84,835.18	☐ Wages, commissions, bonuses, tips							
				☐ Operating a business		☐ Operating a l	ousiness				
		dar year be December		■ Wages, commissions, bonuses, tips	\$66,603.08	☐ Wages, combonuses, tips	missions,				
				☐ Operating a business		☐ Operating a l	ousiness				
a w L	nd other vinnings. ist each	public bene If you are fil	fit payments; ing a joint cas the gross inco	ner that income is taxable. Exapensions; rental income; interse and you have income that your from each source separate.	est; dividends; money collector received together, list it constituted together.	ted from lawsuits; only once under De	royalties; an ebtor 1.				
				Debtor 1		Debtor 2					
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)			
Part 3	3: Lis	t Certain Pa	ayments You	Made Before You Filed for I	Bankruptcy						
_	re eithe ☐ No.	Neither D individual	ebtor 1 nor E primarily for a 90 days befor Go to line 7 List below 6 paid that cr	each creditor to whom you paid editor. Do not include paymen	mer debts. Consumer debts d purpose." d you pay any creditor a tota d a total of \$6,425* or more in ts for domestic support oblige	I of \$6,425* or mor	e? ments and tl	he total amount you			
		not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.									
	Yes.		or Debtor 2 or both have primarily consumer debts. e 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
		■ No.	Go to line 7								
		□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.	•		, ,				
•	Creditor'	s Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for			
					P 3 U	2 2 2					

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Case number (if known) 16-18339

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general par							
	of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	control, or owner of 20% or	more of their voting	securities; and an	y managing ag	ent, including one fo		
	No☐ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment		
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		nents or transfer a	ny property on ac	ccount of a de	bt that benefited an		
	■ No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment tor's name		
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures						
	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	, divorces, collection		ctions, support	or custody		
	Case title Case number	Nature of the case	Court or agency		Status of the	case		
	Brown v. Walker 411256V	Foreclosure	Montgomery Co Court	ounty Circuit	■ Pending □ On appea □ Conclude			
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garnis	hed, attached	seized, or levied?		
	Creditor Name and Address	Describe the Property Explain what happened		Date		Value of the property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fin	ancial institution	, set off any ar	mounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount		
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	■ No □ Yes							

Debtor 1 Annice Walker

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Case number (if known) 16-18339

Par	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.								
	☐ Yes. Fill in the details for each gift or cor Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details.								
	how the loss occurred	nclude	ibe any insurance coverage for the loss the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	The Diamond Law Group, LLC 8613 Cedar Street Silver Spring, MD 20910 seth@thediamondlawgroup.com		Attorney Fees		\$300.00				
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	tors o		or transfer any prope	rty to anyone who				
	No No								
	Yes. Fill in the details.		Description and relative of any	Data ::- :: : : :	A				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

Debtor 1 Annice Walker

Debtor 1 Annice Walker Case number (if known) 16-18339

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.									
	Person Who Received Transfer Address			property transferred		Describe any property or payments received or debts paid in exchange			te transfer was ade	
	Perso	on's relationship to you						Ū		
19.	benefi N	iciary? (These are often called asset-pro		did you transfer any property to a self-settled trust or similar device of ion devices.)				of w	hich you are a	
	Name	e of trust		Description and	value of the pro	pert	y trans	sferred	Da	te Transfer was
									ma	nde
	Within sold, r Includ house	List of Certain Financial Accounts, Ins 1 year before you filed for bankruptcy moved, or transferred? le checking, savings, money market, or les, pension funds, cooperatives, assoc lo fes. Fill in the details.	y, we	re any financial a	ccounts or instr	ume	ents he	ld in your name, or for yo		
				t 4 digits of	Type of accor	unt a	or	Date account was		Last balance
24		ess (Number, Street, City, State and ZIP		ount number	instrument	uni	OI .	closed, sold, moved, or transferred	b	efore closing or transfer
21.	cash,	u now have, or did you have within 1 y or other valuables? lo es. Fill in the details.	ear b	oefore you filed fo	r bankruptcy, aı	ny s	afe dep	oosit box or other deposi	tory	for securities,
		e of Financial Institution ess (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		De	scribe	the contents		Do you still have it?
22.	■ N	you stored property in a storage unit o lo es. Fill in the details.	or pla	ce other than you	r home within 1	yea	r befor	re you filed for bankrupto	:y?	
		e of Storage Facility ess (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		De	scribe	the contents		Do you still have it?
Par	t 9:	Identify Property You Hold or Control t	for S	omeone Else						
	Do yo	u hold or control any property that sor meone.			lude any proper	ty yo	ou bori	rowed from, are storing f	or, o	r hold in trust
	_	lo es. Fill in the details.								
		er's Name ess (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		De	scribe	the property		Value
Par	t 10:	Give Details About Environmental Info	rmat	tion						
For	the pur	rpose of Part 10, the following definition	ons a	ipply:						
	Enviro	onmental law means any federal, state,	, or lo	ocal statute or reg	ulation concern	ning	polluti	on, contamination, releas	ses (of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

Debtor 1 Annice Walker Case number (if known) 16-18339

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Ren	port all notices, releases, and proceedings that		they occurred.					
	Has any governmental unit notified you that yo			ontal law?				
24.	rias any governmental unit notined you that yo	ou may be hable of potentially hable	under of in violation of an environm	entariaw:				
	No							
	Yes. Fill in the details. Name of site	Governmental unit	Environmental law, if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		Date of Hotice				
25.	Have you notified any governmental unit of an	y release of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	.							
	No Yes. Fill in the details.							
	Case Title	Court or agency	Nature of the case	Status of the				
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case				
Pai	rt 11: Give Details About Your Business or Co	·						
		•	or of the fellowing comment on a terror					
27.	Within 4 years before you filed for bankruptcy	•	·	y business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	·						
	☐ An owner of at least 5% of the voting o	or equity securities of a corporation						
	No. None of the above applies. Go to Par	t 12.						
	Yes. Check all that apply above and fill in							
	Address	escribe the nature of the business ame of accountant or bookkeeper	Employer Identification number Do not include Social Security					
		5. 2000 20 20 20 20 20 20 20 20 20 20 20 20	Dates business existed					
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	, did you give a financial statement to	o anyone about your business? Incl	ude all financial				

Part 12: Sign Below

Name

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Date Issued

☐ Yes. Fill in the details below.

Address (Number, Street, City, State and ZIP Code) Case 16-18339 Doc 16 Filed 07/26/16 Page 33 of 37

Debtor 1 Annice	e Walker	Case number (i	16-18339		
with a bankruptcy	<u> </u>	tement, concealing property, or obtaining mo , or imprisonment for up to 20 years, or both.	-	property by fraud in connection	
/s/ Annice Walk	er				
Annice Walker	_	Signature of Debtor 2			
Signature of Debt	or 1				
Date July 26, 2	016	Date			
Did you attach add	itional pages to Your Statement of Fin	ancial Affairs for Individuals Filing for Bankro	uptcy (Official Form 107)?	
■ No					
☐ Yes					
Did you pay or agr	ee to pay someone who is not an attor	ney to help you fill out bankruptcy forms?			
■ No					

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy.fo

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.